

PAYROLL FOR PERSONAL SERVICES <i>(Continuation Sheet)</i>				PAGE NO.
DEPARTMENT OR ESTABLISHMENT		BUREAU, DIVISION OR OFFICE		
LOCATION		PERIOD OF THIS ROLL		
		FROM	TO	
WE, THE SUBSCRIBERS, SEVERALLY ACKNOWLEDGE TO HAVE RECEIVED IN CASH , THE SUMS SET OPPOSITE OUR RESPECTIVE NAMES IN PAYMENT FOR OUR SERVICES DURING THE PERIOD OF THIS ROLL.				
NO.	IDENTIFICATION NO. <i>(If any)</i>	NAME OF EMPLOYEE	NET AMOUNT PAID	SIGNATURE FOR CASH AND NOTATION OF CHECK PAYMENTS <i>(number and date)</i>
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